10-31-02

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Under the Paperwork Reduction Act of 1995, no person valid OMB control number. TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number Filing Date First Named Inventor Group Art Unit Examiner Name	09/945,508 August 30, 2001 Kei-Yu Ko 1765 Lynette T. Umez Eron
Total Number of Pages in Th	is Submission	Attorney Docket Number	
	ENCLOS	SURES (check all that ap	ply)
X Fee Transmittal Form X Fee Attached Amendment / Response After Final Affidavits/declarati Extension of Time Reque Express Abandonment R X Information Disclosure St Certified Copy of Priority Document(s) Response to Missing Pail Incomplete Application Response to Missing Parts under 37 CF 1.52 or 1.53	on(s) Petition and According Provision St Power of Change Address Terminal Small Estement Request Remarks	Routing Slip (PTO/SB/69) companying Petition to Convert to a anal Application of Attorney, Revocation of Correspondence	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter X Additional Enclosure(s) (please identify below): Return Receipt Postcard; Check for \$180.00; PTO-1449 and copies of cited art references
SIC	SNATURE OF APPLI	CANT, ATTORNEY, OR	AGENT
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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$)180.00

Co	emplete if Known	VOV	
Application Number	09/945,508	2	
Filing Date	August 30, 2001	<	
First Named Inventor	Kei-Yu Ko	<u> </u>	
Examiner Name	Lynette T. Umez Eronini	Ų	
Group / Art Unit	1765		
Attorney Docket No.	MI22-2037		

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit	3. ADDITIONAL FEES Large EntitySmall Entity Fee Fee Fee Fee Fee Code (\$) Code (\$)	Fee Paid		
Account Number 23-0925	Code (\$) Code (\$) 105 130 205 65 Surcharge - late filing fee or oath	0.00		
Deposit Account Wells St. John P.S.	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.	0.00		
Name WCIIS St. JOHN 1.5.	139 130 139 130 Non-English specification	0.00		
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination	0.00		
	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00		
2. X Payment Enclosed: X Check Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00		
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00		
1. BASIC FILING FEE	116 380 216 190 Extension for reply within second month	0.00		
Large Entity Small Entity	117 870 217 435 Extension for reply within third month	_0.00		
Fee Fee Fee Fee Description	118 1,360 218 680 Extension for reply within fourth month	0.00		
404 600 204 245 Utility Sline for	128 1,850 228 925 Extension for reply within fifth month	0.00		
106 310 206 155 Design filing fee	119 300 219 150 Notice of Appeal	0.00		
107 480 207 240 Plant filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00		
108 690 208 345 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00		
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00		
	140 110 240 55 Petition to revive - unavoidable	0.00		
SUBTOTAL (1) (\$) 0.00	141 1,210 241 605 Petition to revive - unintentional	0.00		
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)	0.00		
Fee from Ext <u>ra Claims below Fee Paid</u>		0.00		
Total Claims 0 -20** = 0 × = 0	144 580 244 290 Plant issue fee	0.00		
Independent 0 - 3** = 0 X = 0	122 130 122 130 Petitions to the Commissioner	0.00		
Multiple Dependent =0	123 50 123 50 Petitions related to provisional applications	0.00		
**or number previously paid, if greater, For Reissues, see below Large Entity Small Entity	Submission of information bisdesure out	180.00		
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	0.00		
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	0.00		
102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be			
109 78 209 39 ** Reissue independent claims	examined (37 CFR § 1.129(b))	0.00		
over original patent	Other fee (specify)	0.00		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00		
SUBTOTAL (2) (\$) 0.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 180	0.00		
SUBMITTED BY	Complete (if applicable)			
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SUBMITTED BY

Name (Print/Type) Mark S. Matkin

Signature

Complete (if applicable)

Telephone 509-624-4276

Date

Date

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